

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006186

FILED
Jun 29, 2005
Secretary of State

Entity Name: ST JAMES COMMUNITY DEVELOPMENT, INC.

Current Principal Place of Business:

500 N.W. 21ST AVENUE
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

6920 NW 44TH COURT
LAUDERHILL, FL 33319

New Mailing Address:

FEI Number: 65-0708868 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HOWARD, WYLIE L SR
6920 NW 44TH COURT
LAUDERHILL, FL 33319 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOWARD, WYLIE L SR
Address: 6920 N.W 44TH CRT
City-St-Zip: LAUDERHILL, FL 33319

Title: D () Delete
Name: STUBBS, WILLIE
Address: 7410 NW 41TH COURT
City-St-Zip: LAUDERHILL, FL 33319

Title: SD () Delete
Name: HOWARD, WYLIE L JR
Address: 7342 NW 47TH PL
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: S () Delete
Name: PACK, TORENCE
Address: 449 SW 15 STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: DIGGS, WALLACE D
Address: 1151N, W 24TH AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: SEARCEY, ALAN
Address: 1711 MLK BLVD
City-St-Zip: POMPANO, FL 33069

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: SHEPPARD, MOZELLE
Address: 500 NW 21 AVENUE
City-St-Zip: POMPANO BEACH, FL 33069

Title: S (X) Change () Addition
Name: PACK, TORRANCE
Address: 449 SW 15 STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WYLIE L. HOWARD, SR.

_____ Electronic Signature of Signing Officer or Director

REV.

06/29/2005

_____ Date